

IC 12-10-11

Chapter 11. Community and Home Options to Institutional Care for the Elderly and Disabled Board

IC 12-10-11-1

Establishment of board

Sec. 1. The community and home options to institutional care for the elderly and disabled board is established.

As added by P.L.2-1992, SEC.4.

IC 12-10-11-2

Membership; appointment; vacancy; notice to public of nomination process

Sec. 2. (a) The board consists of the following nine (9) members:

- (1) The director of the division of family and children or the director's designee.
- (2) The chairman of the Indiana state commission on aging or the chairman's designee.
- (3) Two (2) citizens at least sixty (60) years of age, nominated by one (1) or more organizations that:
 - (A) represent senior citizens; and
 - (B) have statewide membership.
- (4) One (1) citizen less than sixty (60) years of age nominated by one (1) or more organizations that:
 - (A) represent individuals with disabilities; and
 - (B) have statewide membership.
- (5) One (1) citizen less than sixty (60) years of age nominated by one (1) or more organizations that:
 - (A) represent individuals with mental illness; and
 - (B) have statewide membership.
- (6) One (1) provider who provides services under IC 12-10-10.
- (7) One (1) licensed physician, nurse, or nurse practitioner who specializes either in the field of gerontology or in the field of disabilities.
- (8) One (1) home care services advocate or policy specialist nominated by one (1) or more:
 - (A) organizations;
 - (B) associations; or
 - (C) nongovernmental agencies;that advocate on behalf of home care consumers.

(b) The members of the board designated by subsection (a)(3) through (a)(8) shall be appointed by the governor for terms of two (2) years. In case of a vacancy, the governor shall appoint an individual to serve for the remainder of the unexpired term.

(c) The division shall establish notice and selection procedures to notify the public of the board's nomination process described in this chapter. Information must be distributed through:

- (1) the area agencies on aging; and
- (2) all organizations, associations, and nongovernmental agencies that work with the division on home care issues and programs.

As added by P.L.2-1992, SEC.4. Amended by P.L.150-1995, SEC.15.

IC 12-10-11-3

Per diem; expenses reimbursement

Sec. 3. (a) Each member of the board who is not a state employee is entitled to the minimum salary per diem provided by IC 4-10-11-2.1(b). Such a member is also entitled to reimbursement for traveling expenses and other expenses actually incurred in connection with the member's duties, as provided in the state travel policies and procedures established by the Indiana department of administration and approved by the budget agency.

(b) Each member of the board who is a state employee is entitled to reimbursement for traveling expenses and other expenses actually incurred in connection with the member's duties, as provided in the state travel policies and procedures established by the Indiana department of administration and approved by the budget agency.

As added by P.L.2-1992, SEC.4.

IC 12-10-11-4

Meetings

Sec. 4. The board shall meet at least six (6) times a year.

As added by P.L.2-1992, SEC.4.

IC 12-10-11-5

Officers; election

Sec. 5. Each year the board shall elect from its membership a chairman and vice chairman.

As added by P.L.2-1992, SEC.4.

IC 12-10-11-6

Deliberations procedures

Sec. 6. The board shall establish procedures to govern its deliberations.

As added by P.L.2-1992, SEC.4.

IC 12-10-11-7

Staff services

Sec. 7. The division shall provide staff services for the board.

As added by P.L.2-1992, SEC.4.

IC 12-10-11-8

Duties

Sec. 8. The board shall do the following:

(1) Establish long term goals of the state for the provision of a continuum of care for the elderly and disabled based on the following:

(A) Individual independence, dignity, and privacy.

(B) Long term care services that are:

(i) integrated, accessible, and responsible; and

(ii) available in home and community settings.

- (C) Individual choice in planning and managing long term care.
 - (D) Access to an array of long term care services:
 - (i) for an individual to receive care that is appropriate for the individual's needs; and
 - (ii) to enable a case manager to have cost effective alternatives available in the construction of care plans and the delivery of services.
 - (E) Long term care services that include home care, community based services, assisted living, congregate care, adult foster care, and institutional care.
 - (F) Maintaining an individual's dignity and self-reliance to protect the fiscal interests of both taxpayers and the state.
 - (G) Long term care services that are fiscally sound.
- (2) Review state policies on community and home care services.
 - (3) Recommend the adoption of rules under IC 4-22-2.
 - (4) Recommend legislative changes affecting community and home care services.
 - (5) Recommend the coordination of the board's activities with the activities of other boards and state agencies concerned with community and home care services.
 - (6) Evaluate cost effectiveness, quality, scope, and feasibility of a state administered system of community and home care services.
 - (7) Evaluate programs for financing services to those in need of a continuum of care.
 - (8) Evaluate state expenditures for community and home care services, taking into account efficiency, consumer choice, competition, and equal access to providers.
 - (9) Develop policies that support the participation of families and volunteers in meeting the long term care needs of individuals.
 - (10) Encourage the development of funding for a continuum of care from private resources, including insurance.
 - (11) Develop a cost of services basis and a program of cost reimbursement for those persons who can pay all or a part of the cost of the services rendered. The division shall use this cost of services basis and program of cost reimbursement in administering IC 12-10-10. The cost of services basis and program of cost reimbursement must include a client cost share formula that:
 - (A) imposes no charges for an eligible individual whose income does not exceed one hundred fifty percent (150%) of the federal income poverty level; and
 - (B) does not impose charges for the total cost of services provided to an individual under the community and home options to institutional care for the elderly and disabled program unless the eligible individual's income exceeds three hundred fifty percent (350%) of the federal income poverty level.

The calculation of income for an eligible individual must include the deduction of the individual's medical expenses and the

medical expenses of the individual's spouse and dependent children who reside in the eligible individual's household.

(12) Establish long term goals for the provision of guardianship services for adults.

(13) Coordinate activities and programs with the activities of other boards and state agencies concerning the provision of guardianship services.

(14) Recommend statutory changes affecting the guardianship of indigent adults.

As added by P.L.2-1992, SEC.4. Amended by P.L.77-1994, SEC.1; P.L.114-1997, SEC.1; P.L.24-1997, SEC.29.